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27123	7590 04/08/	2009		Certificat	e of Mailing or Transi	mission
MORGAN & FINNEGAN Transition Team C/O Locke Lord Bissell & Liddell 3 WORLD FINANCIAL CENTER				I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO (571) 273-2885, on the date indicated below.		
NEW YORK, N	Y 10281-2101			(Depositor's name)		
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APPLICATION NO.	FILING DATE		FIRST NAMED INVENTOR	ATTO	DRNEY DOCKET NO.	CONFIRMATION NO.
10/531,363 04/14/2005 Stig-Erik Hultholm $1034281-000022$ 6979 TITLE OF INVENTION: METHOD FOR THE RECOVERY OF METALS USING CHLORIDE LEACHING AND EXTRACTION						
APPLN TYPE	SMALL ENTITY	ISSUE FEE DUE	PUBLICATION FEE DUE	PREV PAID ISSUE FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	МО	\$1510	\$300	\$0	\$1810	07/08/2009
EXAM	IINER	ART UNIT	CLASS-SUBCLASS]		
MCGUTHRY BANKS, TIMA MICHELE 1793			075-740000			
 Change of correspondence address or indication of "Fee Address" (37 CFR 1.363). Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached. "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required. 			2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed. BUCHANAN INGERSOLL & ROONEY PC			
3 ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type) PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment. (A) NAME OF ASSIGNEE (B) RESIDENCE: (CITY and STATE OR COUNTRY) Outotec OYJ Espoo, Finland						
Please check the appropriate assignee category or categories (will not be printed on the patent): 🔲 Individual 🖾 Corporation or other private group entity 🚨 Government						
4a. The following fee(s) Issue Fee Dublication Fee (I) Advance Order	No small entity discount p		b. Payment of Fee(s): (Please first reapply any previously paid issue fee shown above) A check is enclosed. Payment by credit card. Form PTO-2038 is attached. The Director is hereby authorized to charge the required fee(s), any deficiency, or credit any overpayment, to Deposit Account Number 02-4800 (enclose an extra copy of this form).			
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interest as snown by the	records of the United Sta	A 20 1	COffice,			
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	Robert G.			Registration No		
Michaliulia, Vilgilia 22.	313-1430.		on is required to obtain or 1.14. This collection is esty depending upon the indite Chief Information Offic COMPLETED FORMS Tespond to a collection of in			by the USPTO to process) aggathering, preparing, and me you require to complete artment of Commerce, P.O. for Patents, P.O. Box 1450, number.